DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

ATTORNEY DOCKET NO. 10019633 -1

As a below named inventor, I hereby declare that:

My residence/post office add	dress and citizenship are	as stated below next	to my name;		
I believe I am the original, f and joint inventor (if plural n a patent is sought on the inv	ames are listed below) of	only one name is list f the subject matter w	ed below) or a which is claimed	an original, first d and for which	
Printing Mechanism Swath H	leight And Line-Feed Erro	r Compensation			
the specification of which is	attached barata unless t	ha fallowing hav in ak	a a kadı		
· ·		-			
	on as US Application No. or PCT International Application and was amended on (if applicable).				
Number	and was amend	ed on	(if applicat	ole).	
I hereby state that I have re including the claims, as ame disclose all information whice	ended by any amendmen	t(s) referred to above	e. I acknowled		
Foreign Application(s) and/or Claim	of Foreign Priority				
I hereby claim foreign priority bene inventor(s) certificate listed below a a filing date before that of the appli	and have also identified below a	any foreign application for p	ny foreign applica patent or inventor(tion(s) for patent or s) certificate having	
COUNTRY	APPLICATION NUMBER	OATE FILEO	PRIORITY CLAIMEO	UNDER 35 U.S.C. 119	
ام			YES:	NO:	
Ţī.			YES:	NO:	
Provisional Application					
I hereby claim the benefit under Tir below:	tle 35, United States Code Sec	tion 119(e) of any United	States provisional	application(s) listed	
di below:			_		
	APPLICATION NUMBER	FILING DATE	_		
ming and			_		
in the second se					
U. S. Priority Claim I hereby claim the benefit under Ti	tle 35, United States Code, Se	ection 120 of any United S	States application(s	s) listed below and,	
insofar as the subject matter of ear manner provided by the first parage information as defined in Title 37, of application and the national or PCT	raph of Title 35, United States Code of Federal Regulations, Se	Code Section 112, I ackno ction 1.56(a) which occurre	owledge the duty	to disclose materia	
APPLICATION NUMBER	FILING DATE	1	stented/pending/abandon		
ATTENDATION TOTAL		31A103 (pe	terite o/periority/abaricon	100)	

POWER OF ATTORNEY:		L			
As a named inventor, I hereby ap business in the Patent and Tradema	point the following attorney(s) ark Office connected therewith:	and/or agent(s) to prose	cute this applicati	on and transact all	
Customer Numb	er 022879	Place Customer Number Bar Code Label here			
Send Correspondence to:		Direct Telephon	e Calls To:		
HEWLETT-PACKARD COMPAN Intellectual Property Administration		Gregg W Wisdo	om		
P.O. Box 272400 Fort Collins, Colorado 80527-2	400	(360) 212-805	2		
I hereby declare that all star made on information and be with the knowledge that a imprisonment, or both, und false statements may jeopar	pelief are believed to be to willful false statements er Section 1001 of Title	true; and further that and the like so mad 18 of the United Stat	these stateme de are punish tes Code and t	ents were made able by fine or that such willfu	

		• •
Full Name of Inventor:	Tod S. Heiles	Citizenship: US
Residence:	Vancouver, WA USA	
Post Office Address:	16816 SE Evergreen Hwy, Vancouver,	WA 98683-9407
Dollar	.	Sent 24 2001
Inventor's Signature		Date

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION (continued)

ATTORNEY DOCKET NO. 10019633 -1

Full Name of # 2 joint inventor: Hsue-Yang Liu			Citizenship: TW	
Residence: Vancouver, WA USA				
Post Office Address: 3100 SE 168th Ave., #261, Vancouver, WA 98683				
Inventor's Signature	2	Date	ept. 24 200	
Full Name of # 3 joint inventor:			Citizenship:	
Residence:				
Post Office Address:				
Inventor's Signature		Date		
Full Name of # 4 joint inventor:	:		Citizenship:	
Residence:				
Post Office Address:				
Inventor's Signature		Date		
Full Name of # 5 joint inventor	:		Citizenship:	
Residence:				
Post Office Address:				
Inventor's Signature		Date		
Full Name of # 6 joint inventor	:		Citizenship:	
Residence:				
Post Office Address:				
inventor's Signature		Date		
Full Name of # 7 joint inventor	r:		Citizenship:	
Residence:				
Post Office Address:				
Inventor's Signature		Date		
Full Name of # 8 joint inventor	r:		Citizenship:	
Residence:				
Post Office Address:				

Inventor's Signature

Date